

Level of Care Reviews 1st Quarterly Report FY22

Census

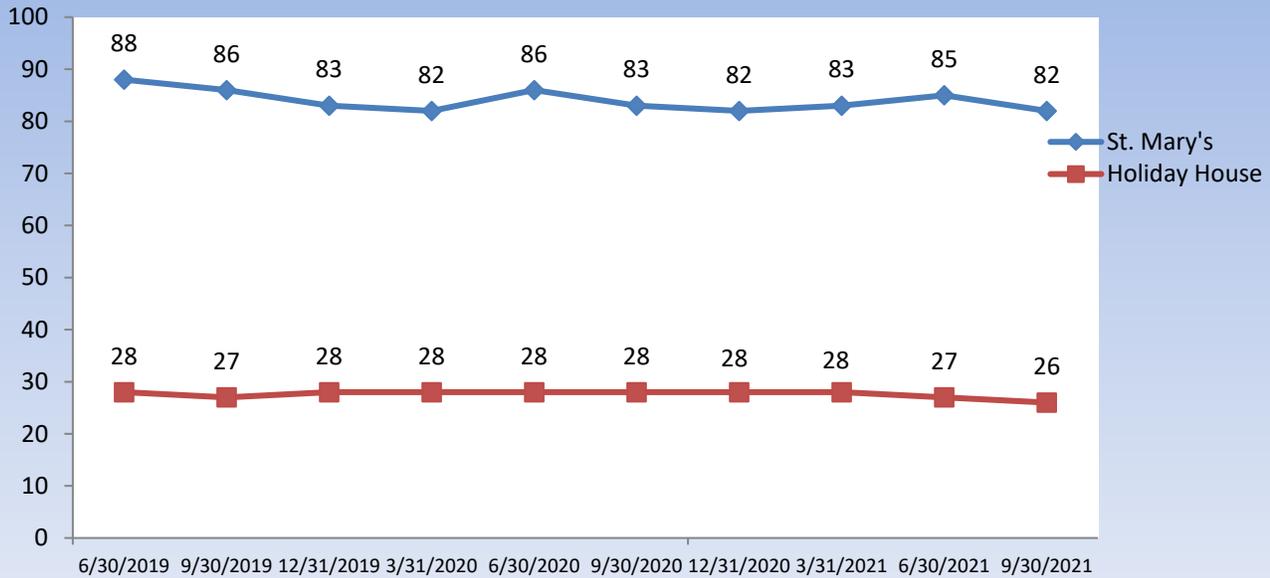
The Family Resource Consultant (FRC) continues to work closely with the Director of Social Work at St. Mary's and the Social Worker at Holiday House to maintain accurate information regarding the census. In the past timely communication regarding admissions presented a challenge to maintaining accurate census information, however since the implementation of Single Point of Entry, the FRC has been better able to track admissions and ask for status updates for pending applications.

During the first quarter of FY22 (July 1, 2021 – September 30, 2021), there were **1** admission and 2 discharges at Holiday House leaving the census at **26**. St. Mary's Home had **1** admission and **4** discharge bringing the census to **82**. The total census as of September 30, 2020 was **108**.

Table 1: St. Mary's and Holiday House Census

Date	Holiday House	St. Mary's	Total
January 1, 2017	26	82	108
April 1, 2017	27	84	111
July 1, 2017	28	83	111
September 30, 2017	26	85	111
December 31, 2017	26	84	110
March 31, 2018	27	86	113
June 30, 2018	28	85	113
September 30, 2018	27	86	113
December 31, 2018	27	84	111
March 31, 2019	28	86	114
June 30, 2019	28	88	116
September 30, 2019	27	86	113
December 31, 2019	28	83	111
March 31, 2020	28	82	110
June 30, 2020	28	86	114
September 30, 2020	28	83	111
December 31, 2020	28	82	110
March 31, 2021	28	83	111
June 30, 2021	27	85	112
September 30, 2021	26	82	108

St. Mary's and Holiday House Census



Children's ICFs

Cumulative Data				
Census as of January 1, 2017	Total Children Admitted to date (1/1/17-9/30/2021)	Total Children Discharged to date (1/1/17-9/30/2021)	Deaths	Census as of end of 4 th Quarter FY21
108	73	68	5	108
1 st Quarter FY22 (July 1, 2021 – September 30, 2021)				
Census July 1, 2021	Admissions	Discharges	Level of Care Reviews (Indicator 18.12)	Post Move Monitoring Contacts
112	2	6	27	6

Level of Care Reviews

During the first quarter of FY22 (July 1, 2021 – September 30, 2021), **18** Level of Care Reviews were completed for St. Mary's Home and **9** Modified Level of Care Reviews were completed by Holiday House. Due to ongoing covid-19 restrictions, Holiday House has not resumed site visits. All modified reviews were completed by Holiday House's QIDP staff. Issues noted during the 1st quarter review included no signature for responsible party (2), beneficiary (1), and treatment team (1), and the VIDES being scored incorrectly (2), or on the wrong form (1). FRC continues to offer recommendations

regarding areas of noncompliance. The facilities are provided 6 months to respond to these areas and other recommendations.

Table 2: Completed Level of Care Reviews

Facility	Completed	Utilization Plan Compliant	Utilization Plan Non Compliant	Certification Compliant	Certification Non Compliant	Plan of Care Compliant	Plan of Care Non Compliant	Discharge Planning Compliant	Discharge Planning Non Compliant
St. Mary's	18	18	0	15	3	14	4	18	0
Holiday House	9	9	0	9	0	9	0	9	0
Total	27	27	0	24	3	23	4	27	0

Level of Care Review Schedule

Level of Care (LOC) Reviews are completed approximately 60 days prior to the beneficiary's annual review. This allows FRC to provide feedback regarding areas of non-compliance from the previous year so that appropriate steps can be taken to address them as the ISP is being developed for the coming plan year. A total of **18** LOC Reviews and **9** Modified LOC Reviews were completed during the 1st quarter of FY22.

Facility	July 2021	Aug 2021	Sept 2021
St. Mary's	9	4	5
Holiday House	5	2	2
Total	14	6	7

Single Point of Entry (Indicator 18.10)

The Single Point of Entry process for admission into Intermediate Care Facilities was implemented effective May 1, 2018.

Identifier	Diverted	Admitted	Denied Admission	Pending	Discharged	Date of LOC Review
1		1/31/2020				Nov 2020
2	May 2018					
3		10/18/18				Sept 2019
4		8/9/18				July 2019
5	Dec 2018					
6			X			
7		12/3/18			9/16/19	Nov 2019
8		9/11/18			3/20/19	Aug2019
9		7/10/18			9/15/2021	June 2019
10		8/14/18				June 2019
11	Feb 2019					
12		11/26/18				Sept 2019
13		11/12/18				Sept 2019
14		3/18/19				Feb 2020
15		12/27/18			2/17/19	Oct 2019

16					Death	7/4/2020
17		12/20/18			3/4/2020	CVTC
18		1/15/19			8/17/2020	Nov 2019
19		3/5/19				Jan 2020
20			X			
21		3/19/19				Jan 2020
22		2/18/19				Dec 2019
23		3/26/19				Jan 2020
24		12/12/19				Nov 2020
25		4/8/19			3/21/2020	Feb 2020
Identifier	Diverted	Admitted	Denied Admission	Pending	Discharged	Date of LOC Review
26		5/28/19				Mar 2020
27		7/16/19				May 2020
28	7/26/19					
29		7/26/19				June 2020
30		9/15/2020				July 2021
31				Placement in community		
32	11/18/19					
33		9/24/19			10/14/19	July 2020
34		10/1/19				July 2020
35		11/12/19				Sept 2020
36		11/26/19			Death 8/25/2020	Sept 2020
37		12/13/19				Nov 2020
38		4/1/2020				Jan 2021
39		4/14/2020				Feb2021
40		3/6/2020				Jan 2021
41		5/13/2020				Mar 2021
42		1/21/2020				Nov 2020
43		6/15/2020				April 2021
44	Tuned 22 on 5/20/2020			Transition to Adult ICF	1/14/2021	
45		5/1/2020				Feb 2021
46		9/15/2020				July 2021
47		10/7/2020				Aug 2021
48		9/22/2020				July 2021
49		12/9/2020				Oct 2021
50		12/2/2020				Oct 2021
51	X					
52		12/2/2020			1/5/2021	Oct 2021
53		3/2/2021				Jan 2022
54		4/12/2021				Feb 2022
55		3/9/2021				Jan 2022
56		3/16/2021				Jan 2022
57		Admitted to an adult ICF				
58			X			
59		1/26/2021				Nov2021
60		9/8/2021				July 2022
61		5/4/2021				Mar 2022

62		6/29/2021				April 2022
63				X		
64		8/2/2021				June 2022
65				X		
66				X		
67	Aug 2021	(not screened)				

VIDES (Indicator 18.10)

Cumulative Data-VIDES (May 1, 2018-September 30, 2021)					
Total Screened	Total Diverted	Total Pending	Total Admitted	Total Referred to RST	Total Denied Admission
66	7	3	49	66	3

1 st Quarter FY22-VIDES (July 1, 2021-September 30, 2021)					
Total Screened	Total Diverted	Total Pending	Total Admitted	Total Referred to RST	Total Denied Admission
4	1	3	2	4	0

Additional Data		
Total Remaining in ICF	Total Discharged/Death prior to Annual LOC Review	Total remaining in the ICF at the time of next Annual Level of Care Review
40	6	17

Demographics

The majority of the beneficiaries residing at both St. Mary's Home for Children (46%) are between the ages of 11 and 17 year. Holiday House has an equal number of children (42%) between the ages of 11 to 17 years and 18 to 20 years.

At St. Mary's Home for Children, there is a relatively even distribution of each gender; with males representing 45% of the beneficiaries and females representing 54%. Conversely, Holiday House is 26% female and 73% male.

There is a relatively even distribution of children residing at St. Mary's with a length of stay of 7 months to 5 years (41%); and more than 5 years (42%). This is also true for children residing at Holiday House; 42% have a length of stay between 7 months and 5 years and 53% have a length of stay of more than 5 years.

Table 4: Demographic Information

Facility	Age			Aging Out	Gender		Length of Stay		
	0-10 Years	11-17 Years	18-20 Years	21-22 Years	Male	Female	0 months-6 Months	7 months-5 Years	Greater than 5 Years
St. Mary's	25	38	14	5	37	45	13	34	35

Holiday House	1	11	11	3	19	7	1	11	14
Total	26	49	25	8	56	52	14	45	49

For 1st Quarter FY22

- VIDES process: Four families/legal guardians received a phone contact to discuss more integrated options. The Community Transition Guide was emailed to all four families/legal guardians. (Indicator 18.10)
- Community Transition Guides are mailed/emailed during January 2021 and June 2021. Guides are also provided upon request. (Indicator 18.13)
- Twenty nine of the SPE individuals have completed their initial LOC reviews. (Indicator 18.12)
- Eleven of the SPE individuals are awaiting their initial LOC reviews. (Indicator 18.12)
- There were no children in the ten and under category discharged this quarter. (Indicator 18.15)
- Six families of children 10 and under were contacted in July 2021 for the quarterly calls. Twelve messages were left with families and seven calls were attempted. (Indicator 18.15)
- Twenty seven annual contacts were completed with families to develop/update the Family Outreach Plan. (Indicator 18.16, 18.17, &18.18)
- Four Admission Awareness Letter and five Active Discharge Letters were provided to Community Services Boards. One discharge to CHKD for hospitalization with the goal of returning to St. Mary’s Home. No letter was sent to the CSB. (Indicator 18.22)
- Eight families were linked to the VCU Family to Family Network of Virginia this quarter. Two families responded and were provided support. Three families did not respond and were closed. One parent requested no further contact. Two referrals were received the last week of September 2021 and will be reported on in the 2nd Quarter FY22 report. (Indicator 18.19)
- Twelve adults were screened through Single Point of Entry this quarter.

Diversions

There have been 6 diversions since May 1, 2018:

- 6011W (age 15- parent decided to take the individual home. Children’s Hospital of King’s Daughter assisted with securing needed equipment so that the individual could rehab at home)
- 3036T (age 7- parent decided to keep the individual at home. Case management services were added)
- 8473P (age 18- Individual received a CL slot back in Dec 2018)
- 5053W (age 18- Placed in foster care services with Barry Robinson. Individual transitioned home with services when she turned 18)
- 9043E (age 14- decided to maintain CL waiver slot, exploring sponsored residential services)
- 3802040588 (age 10 -diverted to sponsored residential services from hospital)

Unavailable Service Tracker

Unique Identifier	Service	Region	Reason

There were no reports of unavailable services during this quarter

Definitions:

Admission- admission occurs when the requesting facility completes their screening and review process and the individual moves into the facility.

Diversion- diversion occurs when the Substitute Decision Maker (SDM) and /or Legal Guardian (LG) agrees to explore and consequently selects more integrative options in the community.

Denial- denial occurs when the requesting facility completes the screening/review process and it is determined that the facility is unable to adequately meet the individual's needs.

Pending- pending status occurs when the SDM or LG declines to explore more integrated options and the facility is completing the screening/review process.